COLORADO RIVER INDIAN TRIBES LEGAL AID DEPARTMENT

PROBATE INTAKE

Name :	Social Security #:
Address:	D.O.B. :/
	Phone : ()
DUCUDA	
DECEDE	ENT INFORMATION
Decedent's Full Legal Name :	Date of Death :
Spouse's Name :	Decedent's Social Security No:
Address at time of death:	County :
Occupation at time of death:	Employer:
Person nominated in Will to be Personal R	Representative:
REA	AL PROPERTY
Description Market Value Amt. Of E	ncumbrances
	VEHICLES fortorcyles, Motor homes, Airplanes, etc.)
	of Encumbrances
	DEPOSIT ACCOUNTS s, Checking, Certificates of Deposit, Money Market Accounts, etc)
	OCKS & BONDS
Description Market Value	Amt. Of Encumbrances
LIF	TE INSURANCE

Description Face Value Cash Value Against Policy Amt. of Loans

PENSIONS, PROFIT SHARING, RETIREMENT ACCOUNTS, ANNUITIES

Description Estimated Value Encumbrances

BUSINESS INTERESTS

(Partnerships, Corporations, etc.)

Description Estimated Value Encumbrances

ACCOUNTS RECEIVABLE

(Notes, Contracts, Mortgages, Debts.)

Description Gross Value

HOUSE HOLD FURNITURE, FURNISHINGS, APPLIANCES

Description Gross Value

PROPERTY WITH INTRINSIC OR ARTISTIC VALUE

(Art Objects, Paintings, Antiques, Rare Books, Coins, Stamps, Jewelry, Heirlooms, etc)

Description Market Value Amt. Encumbrances

OTHER PROPERTY OF VALUE OVER \$50.00

(Televisions, Cameras, Stereos, Radios, China, Silver, Lawnmowers, Barbecues, Recreational Equipment, Etc)

Description Market Value Amt. Of Encumbrances

DEBTS & OTHER LIABILITIES

Name of Creditor Present Balance Purpose of Debt. Security for Debt if Any

CHILDREN

(Natural or Adopted

BROTHERS & SISTERS

(Natural or Adopted)

CERTIFICATION

By my signature below, I certify that all of the information herein is true and correct to the best of my knowledge

Date:	Signature:
Date:	Sign